sala.

## Entry Blank—Please Type or Print

☐ Ms./Artist ☐ Mr./Artist _	CRA	16	LVCA	5		
Permanent Address	739 ( Street	JUYA	HOF	A = N;	st name	
44: Zip	240	Daytime	e Tel. ( <b>2/6</b> ) area	673 KEI	- y	49.
	308 FN	5000		<i>KEI</i>	y de	
442 Zip	42	Daytime	e Tel. ( 2/6) area	672		22
	esently live in one n county were you		ties of the West	tern		
Collaborator (if a	iny)	-				
☐ Artist will pic☐ Museum sho	tries are not acce k up at Museum. uld dispose of. uld ship to artist					
	Street					
City	Stat	te			Zip	

## **Special Instructions**

Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.

When necessary, include instructions or a drawing for assembling and displaying an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until May 27, 1990.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

Signature Cay N. Tuas

I have received the unsold/unaccepted object(s) in good condition.

Signature \_\_\_\_\_

## **Entry Blanks**

Detach entire portion along dotted line and submit with slides, but retain tags

A Pain	_	☐ Graphics ☐ Crafts	☐ Photography (specify category)			
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		70.	31			
<b>☑</b> Pain	tings [	Graphics	☐ Photog	raphy		
□ Scul	pture [	Crafts	(sp	ecify category)		
Materials used (med						
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ON	RAG'	PAPE	<			
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